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<b>CHANGE OF CORRESPONDENCE ADDRESS Application</b>  Address to: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	Application Number	10/595,930
	Filing Date	May 26, 2006
	First Named Inventor	Thomas Hesterkamp
	Art Unit	Not Yet Assigned
	Examiner Name	Not Yet Assigned
	Attorney Docket No.	37998-237377

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I am the:

- ☐ Applicant/Inventor  
☐ Assignee of record of the entire interest.  
 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  
☒ Attorney or agent of record. Registration Number 54,262.  
☐ Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number \_\_\_\_\_.

Signature

Typed or Printed Name

Kavita B. Lepping

Date

Telephone (202) 344-4000

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☒ \*Total of 1 Form is/are submitted.